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**Art Unit: 2618**

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**From : Winston Hsu, Registration No. 41,526**

**Serial No.: 10/605,563**

**Attorney Docket No.: REAP0020USA4**

**Subject: Information Disclosure Statement (IDS)**

**Total Pages: 6 pages (including cover page)**

**Winston Hsu** JAN. 10 2007

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PTO/SB/21 (07-06)

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<b>TRANSMITTAL FORM</b>  <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/605,563	
	Filing Date	10/09/2003	
	First Named Inventor	Der-Zheng Liu	
	Art Unit	2618	
	Examiner Name	LE, NHAN T	
Total Number of Pages in This Submission	5	Attorney Docket Number	REAP0020USA4

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	North America Intellectual Property Corporation		
Signature	<i>Winston Hsu</i>		
Printed name	Winston Hsu		
Date	JAN. 10 2007	Reg. No.	41,526

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature	<i>Zoe Huang</i>		
Typed or printed name	Zoe Huang	Date	JAN. 10 2007

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PTO/SB/17 (07-06)

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Effective on 12/08/2004.  
 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818)

## FEE TRANSMITTAL

### For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$) **0.00**

#### Complete if Known

Application Number	10/605,563
Filing Date	10/09/2003
First Named Inventor	Der-Zheng Liu
Examiner Name	LE, NHAN T
Art Unit	2618
Attorney Docket No.	REAP0020USA4

#### METHOD OF PAYMENT (check all that apply)

- ☐ Check   ☐ Credit Card   ☐ Money Order   ☐ None   ☐ Other (please identify): \_\_\_\_\_  
☒ Deposit Account   Deposit Account Number: **50-3105**   Deposit Account Name: North America Intellectual Property Corporation  
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#### FEE CALCULATION

##### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

##### 2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
- 20 or HP = _____ x _____ = _____		
HP = highest number of total claims paid for, if greater than 20.		
<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
- 3 or HP = _____ x _____ = _____		
HP = highest number of independent claims paid for, if greater than 3.		

##### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>
_____ - 100 = _____	_____ / 50	_____ (round up to a whole number)	x _____ = _____	

##### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_

**Fees Paid (\$)**

#### SUBMITTED BY

Signature	<i>Winston Hsu</i>	Registration No. (Attorney/Agent)	41,526	Telephone	3027291562
Name (Print/Type)	Winston Hsu	Date	JAN. 10 2007		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Der-Zheng Liu, et al.

5 Appl. No.: 10/605,563 Filing Date: 10/09/2003  
Examiner: LE, NHAN T Art Unit: 2618  
Docket No.: REAP0020USA4 Confirmation No.: 2562

Title: AUTOMATIC GAIN CONTROL OF MULTIPLE ANTENNA OFDM  
10 RECEIVER

To: Commissioner for Patents  
P.O. BOX 1450  
Alexandria, VA 22313-1450

15 Subject: Information disclosure statement under 37  
CFR §1.56

20 Dear Sir,

This is an Information Disclosure Statement in  
accordance with the duty to disclose information  
material to patentability under 37 CFR §1.56. The  
25 applicant wishes to make of record the document(s)  
listed on the accompanying form PTO/SB/08.

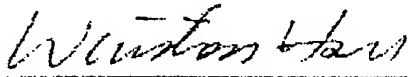
Since this IDS is filed after the mailing date of the  
first Office action but before final Office  
30 action/notice of allowance, consideration of the  
information disclosure statement is hereby requested  
according to 37 CFR §1.97(c).

That each item of information contained in the information disclosure statement was first cited in an Office communication mailed on December 22, 2006 for the US parent application number 10/249,557, which are no more than three months prior to the filing of the information disclosure statement.

It is respectfully requested that the examiner can consider the document(s) listed on the accompanying form PTO/SB/08 and that it be made of record in the application. The applicants sincerely hope that the examiner initials the cited reference(s) on the form and that a copy of the initialed form be sent to the applicants with the next communication from the examiner.

Respectfully submitted,

20

Date: JAN. 10 2007

Winston Hsu, Patent Agent No. 41,526

P.O. BOX 506, Merrifield, VA 22116, U.S.A.

Voice Mail: 302-729-1562

25 Facsimile: 806-498-6673

e-mail : winstonhsu@naipo.com

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PTO/SB/08a (07-06)

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Substitute for form 1449A/PTO

## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

### Complete if Known

Application Number	10/605,563
Filing Date	10/09/2003
First Named Inventor	Der-Zheng Liu
Art Unit	2618
Examiner Name	LE, NHAN Y
Attorney Docket Number	REAP0020USA4

Sheet

of

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. <sup>1</sup>	Document Number Number-Kind Code <sup>2</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	1	US- 2002/0181549 A1	12-05-2002	Linnartz, Johan Paul Marie Gerard; et al.	
	2	US- 2004/0005010 A1	01-08-2004	Mc. Ping; et al.	
	3	US- 2003/0112882 A1	06-19-2003	Sampath, Hemanth	
	4	US- 6,141,393	10-31-2000	Thomas, et al.	
	5	US- 6,862,440 B2	03-01-2005	Sampath	
	6	US- 6,996,185 B2	02-07-2006	Kadous	
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FOREIGN PATENT DOCUMENTS					
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document Country Code* Number* Kind Code* (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear

Examiner Signature		Date Considered	
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 1 Applicant's unique citation designation number (optional). 2 See Kind Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. 3 Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). 4 For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. 5 Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. 6 Applicant is to place a check mark here if English language Translation is attached.

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